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PTO/SB/50 (02-01)

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10/10/2003 11:51 A.M. 14627

Address to: Assistant Commissioner for Patents Box Reissue Washington, DC 20231		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Attorney Docket No.</td> <td>NSC1-G9900</td> </tr> <tr> <td>First Named Inventor</td> <td>Pai-Hsiang Kao</td> </tr> <tr> <td>Original Patent Number</td> <td>6,023,094</td> </tr> <tr> <td>Original Patent Issue Date (Month/Day/Year)</td> <td>02/08/2000</td> </tr> <tr> <td>Express Mail Label No.</td> <td>EL 727719571 US</td> </tr> </table>		Attorney Docket No.	NSC1-G9900	First Named Inventor	Pai-Hsiang Kao	Original Patent Number	6,023,094	Original Patent Issue Date (Month/Day/Year)	02/08/2000	Express Mail Label No.	EL 727719571 US
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Express Mail Label No.	EL 727719571 US												
APPLICATION FOR REISSUE OF: <input checked="" type="checkbox"/> Utility Patent <input type="checkbox"/> Design Patent <input type="checkbox"/> Plant Patent <i>(Check applicable box)</i>													
APPLICATION ELEMENTS (37 CFR 1.173) 1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/ SBI 56) <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification and Claims in double column copy of patent format <i>(amended, if appropriate)</i> 4. <input checked="" type="checkbox"/> Drawing(s) <i>(proposed amendments, if appropriate)</i> 5. <input checked="" type="checkbox"/> Reissue Oath/Declaration (original or copy) <i>(37 C.F.R. § 1.175) (PTO/SB/51 or 52)</i> 6. <input checked="" type="checkbox"/> Power of Attorney 7. Original U.S. Patent currently assigned? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If Yes, check applicable box(es))</i> <input checked="" type="checkbox"/> Written Consent of all Assignees (PTO/SB/53) <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (PTO/SB/96) 8. <input type="checkbox"/> CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table 9. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all of the following are necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CFR) b. Specification Sequence Listing on: i <input type="checkbox"/> CD-ROM (2 copies) or CD-R (2 copies); or ii <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies		ACCOMPANYING APPLICATION PARTS 10. <input checked="" type="checkbox"/> Statement of status and support for all changes to the claims. See 37 CFR 1.173 (c). 11. <input type="checkbox"/> Original U.S. Patent for surrender <input type="checkbox"/> Ribbioned Original Patent Grant <input type="checkbox"/> Statement of Loss (PTO/SB/55) 12. <input type="checkbox"/> Foreign Priority Claim (35 U.S.C. 119) <i>(if applicable)</i> 13. <input checked="" type="checkbox"/> Information Disclosure <input type="checkbox"/> 19 Copies of IDS Statement (IDS)/PTO-1449 Citations 14. <input type="checkbox"/> English Translation of Reissue Oath/Declaration <i>(if applicable)</i> 15. <input checked="" type="checkbox"/> Preliminary Amendment 16. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 17. Other: <u>Consent by Assignee to</u> <u>Filing of Reissue</u> <u>Application and</u> <u>Offer to Surrender</u> <u>Original Patent</u>											
18. CORRESPONDENCE ADDRESS													
<input type="checkbox"/> Customer Number or Bar Code Label [REDACTED] or <input checked="" type="checkbox"/> Correspondence address below <i>(Insert Customer No. or Attach bar code label here)</i>													
Name	Philip A. Girard c/o GIRARD & EQUITZ LLP												
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			94104										
City	San Francisco	State	CA										
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Country	U.S.A.	Telephone	(415) 433-2250										
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">NAME <small>(Print/Type)</small></td> <td style="width: 30%;">Philip A. Girard</td> <td style="width: 20%;">Registration No. <small>(Attorney/Agent)</small></td> <td style="width: 30%;">28,848</td> </tr> <tr> <td>Signature</td> <td><i>Philip A. Girard</i></td> <td>Date</td> <td>12/17/01</td> </tr> </table>				NAME <small>(Print/Type)</small>	Philip A. Girard	Registration No. <small>(Attorney/Agent)</small>	28,848	Signature	<i>Philip A. Girard</i>	Date	12/17/01		
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Signature	<i>Philip A. Girard</i>	Date	12/17/01										

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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) NSC1-G9900		
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 6	Total Claims (37 CFR 1.16(j)) Independent claims (37 CFR 1.16(i))	(B) 6	**** 0 =	x \$ _____ =	or	x \$ 18 =	0	
(C) 2		(D) 2	* 0 =	x \$ _____ =		x \$ 84 =	0	
Basic Fee (37 CFR 1.16(h))				\$ _____			\$ 740	
Total Filing Fee				\$ _____		OR	\$ 740	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	*** 15	MINUS	** 20	* = 0	x \$ _____ =		x \$ 18 =	0
Independent Claims (37 CFR 1.16(i))	*** 3	MINUS	***** 3	= 0	x \$ _____ =		x \$ 84 =	0
Total Additional Fee					\$ _____		OR	\$ 0
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>50-1697</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>740.00</u> to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p>								
<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>								
<u>12/17/01</u> Date				 Signature of Applicant, Attorney or Agent of Record <u>Philip A. Girard, Reg. No. 28,848</u> Typed or printed name				

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CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)

Applicant(s): PAI-HSIANG KAO, et al.

Docket No.

NSC1-G9900

Serial No.
NewFiling Date
HerewithExaminer
UnknownGroup Art Unit
Unknown

Invention: SEMICONDUCTOR WAFER HAVING A BOTTOM SURFACE PROTECTIVE COATING

I hereby certify that the following correspondence:

PAT. APP. - REISSUE OF U.S. PAT. NO. 6,023,094: (1) Reissue App. Transmittal Letter & Fee Transmittal Form (dup.); (2) Specification & Claims; (3) Three Drawing Sheets; (4) Reissue App. Declaration [incl. Power of Attorney] by Assignee; (5) Information Disclosure Statement w/___ references; (6) Check - \$740.00; (7) Statement Regarding Claims; (8) Consent by Assignee to Filing of Reissue App. & Offer to Surrender Original Patent; and, (9) Postcard

(Identify type of correspondence)

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: The Assistant Commissioner for Patents, Washington, D.C. 20231 on

December 17, 2001*(Date)*Jacob S. Zweig*(Typed or Printed Name of Person Mailing Correspondence)*
*(Signature of Person Mailing Correspondence)*EL 727719571 US*("Express Mail" Mailing Label Number)***Note: Each paper must have its own certificate of mailing.**